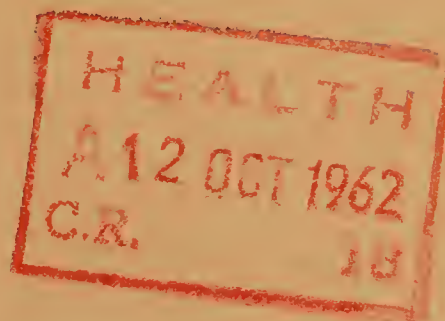
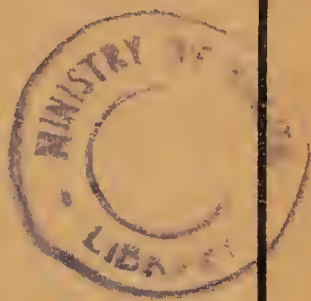


Urban District of
Windermere



ANNUAL REPORT

OF THE

Medical Officer of Health

FOR THE YEAR

1961

KENDAL

TITUS WILSON & SON, LTD.

1962

Combined Districts of Westmorland

Health Department

*With the Compliments of the
Medical Officer of Health*

Stricklandgate House.

Kendal.

Urban District of Windermere

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Kendal 1296

Stricklandgate House,
P.O. Box 18,
Kendal.

*To the Chairman and Members of the Urban District Council of
Windermere.*

SIR, LADIES AND GENTLEMEN,

I have the honour to submit to you my Annual Report on the health of the Urban District for the year 1961.

I wish to acknowledge the help and ready co-operation of my colleague the County Medical Officer of Health, and also the assistance afforded to me by the local general medical practitioners.

I am indebted also to the Public Health Inspector and his staff for the spirit of teamwork which exists in my department, and for the fund of local knowledge which they have laid at my disposal.

I have the honour to be,

Sir, Ladies and Gentlemen,

Your obedient servant,

FRANK T. MADGE,

Medical Officer of Health.

NATURAL AND SOCIAL CONDITIONS OF THE DISTRICT.

Area of the Urban District in acres	...	...	...	9,723
Population (Registrar-General's mid year estimate)				6,550
Inhabited houses	...	...	...	2,370
Rateable Value	...	...	...	£110,952
Product of a Penny Rate	...	...	...	£455
Rate in the Pound levied	...	...	...	22/od.
of which the County Rate was	...	...	...	15/od.

The Urban District of Windermere lies in a long narrow strip down the east side of the Troutbeck Valley and for four miles along the east bank of Windermere Lake. The District slopes steeply from a level of about 800 feet in the east down to the Lake which lies at about 130 feet above sea level. The slopes are well wooded and exquisite vistas of most of the Lake District are obtainable throughout.

The geology of the Urban District comprises in the southern half steeply dipping Kirkby Moor Flag in the Upper Ludlow Series of the Silurian System. In the northern half the rocks are Coniston Grits in the Wenlock Series of the Silurian System. At the extreme north in the Troutbeck Valley, there are thin beds of Taranon Shales, pale slates, Coniston Limestone, and then occur the Borrowdale Volcanic Series. There are occasional areas of glacial drift and some alluvial deposit in the valleys.

The climate is mild and equable. The valley bottoms are sheltered from the prevailing westerly winds, and the open aspect to the south-west provides full access to sunshine. Temperature gradient inversions are frequent at night but are soon dispelled in the morning. The rainfall varies between 70 and 75 inches a year, but this figure is due more to the heaviness of the rain when it comes rather than to an undue proportion of rainy days. Snow may be expected for one or two weeks in the late winter.

The District is mainly residential in character with a seasonal influx of holiday visitors to enjoy the amenities of the National Park. This influx raises the population to a peak of approximately 10,000. The outlying portions of the District are mainly agricultural and many of the small local industries are ancillary to agriculture. There are also the following industries which provide a certain amount of local employment and stability to the area to balance the fluctuating conditions in the holiday trade:—

- | | |
|---------------------|---------------------------|
| Boatbuilding. | Machine Tool Manufactory. |
| Coffin Manufactory. | Laundry. |
| Cake Manufactory. | Motor Engineers. |

The variety of these opportunities for local employment has, with emigration, kept Windermere happily free from unemployment. These industries, together with the trade associated with the hotels and boarding-houses, have provided that economic security and local prosperity which is a most important factor in the maintenance of the public health.

STAFF.

Name	Qualifications.	Office.	Whole or Part Time.	Other Offices.
Madge, F. T.	M.D., Ch.B., M.R.C.S., L.R.C.P., D.P.H.	Medical Officer of Health	Part	M.O.H. Combined County Districts of Westmorland
Shepherd, D.	F.A.P.H.I., F.F.S., Cert. S.I.B.	Public Health Inspector	Part	Additional Public Health Inspector, South West- morland Rural District
Machell, B. M.	—	Clerk to Medical Officer of Health	Part	Clerk to M.O.H. Combined County Districts of Westmorland

Staff Changes.

There were no staff changes during the year.

COMMITTEES.

The Minister of Health requires me to include a list of your Council's committees which are concerned with matters of public health.

The Health Committee deal with the principal matters, but there are other aspects of public health importance which are dealt with by the Water and Housing Committees.

VITAL STATISTICS.

The following extracts are made from information supplied by the Registrar-General, with figures for 1960 for comparison.

Area of the Urban District in acres 9,723

	1960	1961
Estimated civilian population (mid year) ..	6,460	6,550
Live Births. Legitimate— males	38	36
females	36	43
Illegitimate— males	2	2
females	1	3
Total	77	84
Crude Rate per 1,000 population	11.9	12.8
Corrected Rate per 1,000 popula- tion	12.7	13.6
Birth Rate for England and Wales	17.1	17.4
Illegitimate Birth Rate per 1,000 population .. ..	.46	.76
Illegitimate Birth Rate per 1,000 live births.	38.9	59.7
Still Births. Legitimate— males	—	—
females	1	—
Illegitimate— males	—	—
females	—	—
Total	1	—
Total (live and still) births ..	78	84
Rate per 1,000 total (live and still) births	12.8	—
Rate for England and Wales ..	19.7	18.7

	1960	1961
Deaths. males	52	40
females	63	60
Total	115	100
Crude Rate per 1,000 population ..	17.8	15.3
Corrected Rate per 1,000 population	13.7	11.9
Rate for England and Wales ..	11.5	12.0
Infantile Deaths (under 1 year)		
Total deaths under 1 year.. ..	2	4
Rate per 1,000 live births	25.9	47.3
Rate for England and Wales ..	21.7	21.4
Legitimate	1	4
Rate per 1,000 legitimate live births	13.5	50.6
Illegitimate	1	—
Rate per 1,000 illegitimate live births	333.3	—
Neonatal Deaths (under 4 weeks)		
Total neonatal deaths ..	2	3
Rate per 1,000 live births ..	25.9	35.7
Rate for England and Wales ..	15.6	15.5
Early Neonatal Deaths (under 1 week):		
Total early neonatal deaths ..	2	3
Rate per 1,000 live births ..	25.9	35.7
Perinatal Mortality		
Stillbirths and deaths under		
1 week.. .. .	3	3
Rate per 1,000 total (live and		
still) births	38.4	35.7
Maternal Mortality:		
Total Deaths	—	—
Rate per 1,000 total (live and		
still) births	—	—
Rate for England and Wales ..	0.39	0.33

Deaths from certain causes :—		1960.	1961.
Cancer	... ..	25	18
Measles	... ..	Nil	Nil
Whooping Cough	... ..	Nil	Nil

The main causes of death were :—

Heart Disease	... ..	36
Vascular lesions of nervous system	... ..	23
Cancer	... ..	18

COMMENTARY ON THE VITAL STATISTICS.

Population.

Your population at the 1951 Census was 6,315 persons, comprising 2,708 males and 3,607 females, an increase of 3.8% since the 1931 Census. The Registrar-General's current estimate of your civilian mid year resident population was 6,550.

The preliminary report of the 1961 Census shows 6,556 persons, made up of 2,873 males and 3,683 females. That represents an intercensal increase of 3.8 per cent for the past ten years.

Your population is fairly stable, but a proper perspective cannot be obtained by considering merely one year's changes. It is the general trend of population which is important for the planning of your future housing, water and sewerage requirements, and for the broader issues of the economic prosperity of your District.

You have not maintained your population by your own reproduction. You have relied upon the yearly immigration of people from other areas to keep up your numbers. That is why you have a predominantly elderly population. The 1951 Census showed that the nett immigration since 1931 amounted to more than twice your natural decline by excess of deaths over births.

The 1951 Census also showed a daily tidal flow of between 800 and 900 people across the urban district boundary. It is some measure of the dormitory use of Windermere. 455 persons go out of Windermere daily to work elsewhere, made up of 331 men and 124 women. Just about half of them go to Kendal, a quarter go into Lakes U.D. and the remainder to Lancashire and other foreign parts.

On the other hand nearly the same number of outsiders come into Windermere to work. 409 of them, comprising 284 men and 125 women. Lakes U.D. contribute 144, Lancashire 130, South Westmorland R.D. 68, and Kendal another 57.

The daily interchange of talent probably reflects to some extent the rigidity of housing policy, but no doubt offers a glimpse of wider

horizons. The 1951 Census revealed anyway that only some 55% of the people of Westmorland were born in the County.

Birth Rate.

I have already referred to the continued low birth rate, now only two-thirds of the national rate. Apart from the local economic circumstances the effect of the two wars aggravated the position. If your native community is to survive you must raise your birth rate well above your death rate and to do that you will have to recapture and hold the faith of your young people in your local life. There are only just over half of them left now.

Still Birth Rate.

Your still birth rate was not statistically significant.

Death Rate.

Your corrected death rate was slightly below the average for England and Wales, although the crude rate was much higher due to your elderly population.

Infantile and Neo-natal Deaths.

Infantile deaths are deaths in children under the age of one year, and included in this figure are the neo-natal deaths, which are deaths in children under the age of one month. There were four during the year.

Maternal Mortality.

There were no maternal deaths.

PREVALENCE AND CONTROL OF INFECTIOUS AND OTHER DISEASES.

Public Health Act, 1936. Sections 143-170.

National Health Service Act, 1946. Part III.

The general incidence of illness can be assessed by the weekly number of new claims for sickness benefit at our local National Insurance offices. A logarithmic graph of those figures shows a regular seasonal pattern over the years, and any variations are usually worth investigating.

Measles was again the main feature of the year. The epidemic had started during the previous autumn and continued until late spring in the current year. It was associated with a large, similar epidemic in Kendal. Fortunately the disease was amenable to modern methods of treatment, so that none of the patients needed admission to hospital for complications, and there were no deaths.

It is pleasing to record that the notification of infectious disease has much improved in recent years, and I am very grateful to my colleagues in general practice for their prompt help in this respect. I look upon the control of notifiable diseases as one of the most important duties on our department.

NOTIFIABLE DISEASES TABLE.

	Total	Ages												Admitted to Hospital	Deaths
		-1	1-	2-	3-	4-	5-	10-	15-	20-	35-	45-	65-		
Measles	115	1	6	12	13	13	52	16	2	-	-	-	-	-	
TOTAL	115	1	6	12	13	13	52	16	2	-	-	-	-	-	

TUBERCULOSIS TABLE.

Age Periods	NEW CASES				DEATHS			
	Respira- tory		Non-res- piratory		Respira- tory		Non-res- piratory	
	M	F	M	F	M	F	M	F
0 ..	—	—	—	—	—	—	—	—
1 ..	—	—	—	—	—	—	—	—
5 ..	—	—	—	—	—	—	—	—
15 ..	—	—	—	1	—	—	—	—
25 ..	—	—	—	—	—	—	—	—
35 ..	1	—	—	—	—	—	—	—
45 ..	—	—	—	—	—	—	—	—
55 ..	—	—	—	—	—	—	—	—
65 ..	—	—	—	—	—	—	—	—
Total ..	1	—	—	1	—	—	—	—

TUBERCULOSIS.

Tuberculosis is the most important communicable disease of our time. Its prevention is primarily dependent upon social and economic factors in the general community, and secondarily upon the management of the established case. Your Council’s functions are three-fold: to investigate the source of infection, to prevent the spread of infection, and to remove conditions favourable to infection.

The number of tuberculosis patients on the register at the year end were:—

		1960.	1961.
Respiratory	...	24	16
Non-Respiratory	...	4	3
		—	—
		28	19
		—	—

During the spring of 1961 we had another of the periodical visits of the Mass Radiography Unit of the Manchester Regional Hospital Board. 839 people were X-rayed at Windermere, and a further 413 at Bowness. Only those over 15 years of age were accepted in this survey.

I should like to see many more of our local population take advantage of this valuable service. It not only detects pulmonary tuberculosis at the most favourable time for a cure, but it also provides an early warning against many other chest conditions, lung cancer, and certain heart diseases.

At the time of going to press we had not received any analysis of results especially applying to the Windermere and Bowness visits, but we do know the results for the whole 11,206 persons X-rayed in the Kendal, South Westmorland, Lakes and Windermere tour.

Thirteen cases of active pulmonary tuberculosis were discovered in the whole area: six of them were in the groups examined from factories and offices, and seven cases were among the general public who volunteered for X-ray. Ten were men and three were women. This is rather a high rate for a predominantly rural region, being 1.8 per thousand, as again 0.97 per thousand at the previous survey in 1957. All these thirteen cases needed either close clinic supervision or treatment in hospital. Waiting time is nowadays very short for admission to hospital, and modern drugs achieve most promising results for returning the patient to a useful working life.

Twelve other cases of non-active pulmonary tuberculosis were revealed, requiring only occasional out-patient supervision. It is especially important to discover these cases, so that we can do all in our power to prevent them breaking down into a more active state.

Four cases of malignant cancer of the lung and two cases of non-malignant growths were found, and over 80 cases of abnormalities of the heart.

Such discoveries more than justify the visits of the Mass Radiography Units to our area at regular intervals. I think that we should do all we can to make really excellent arrangements for their reception in our townships and villages, and encourage our local people to turn up in full force for their chest X-rays.

The Hospital Services.

National Health Service Act, 1946. Part II.

Your District lies in the area of the Manchester Regional Hospital Board, and most of the general needs of our local people have historically been met by the Westmorland County Hospital at Kendal.

Some of the more specialised services have always had to be referred to more distant centres. But there are signs of change ahead.

The Government's national policy to develop what are to be called District Hospitals seems likely to mean that our local folk will have to rely more and more on Lancaster, and less on Kendal, as the Hospital Plan comes into effect in the next ten years.

Some people think that Westmorland risks being left rather ill served if the hospital services concentrate themselves on Lancaster and Carlisle. There is a lot of territory in between, and transport communications are not very easy for out-patients and visiting relatives to get to those hospitals and home again.

On the whole, the Regional Hospital Boards have very much neglected public relations during their thirteen years of existence, and consultation with local opinions and feeling has been rather poor. It does not seem too unreasonable for the man in the street to ask whose hospitals are they anyway? The Hospital Service might do well to foster a closer relationship with the ordinary people they claim to serve.

Another facet of this same problem arose during 1961 when the published intentions of the Manchester Regional Hospital Board seemed to imply that all the maternity and ante-natal beds to serve our District would be concentrated at Lancaster, and that Helme Chase Maternity Home at Kendal might be closed within ten years. After strong representations by all the county district councils in southern Westmorland, an assurance was given by the Manchester Regional Hospital Board that Helme Chase should continue as a general practitioner maternity home, and that some consultant services should continue to be available in Westmorland. Public sentiment seemed to be particularly strong about preserving some maternity beds in a place where the local women wanted them.

I think that the Regional Hospital Boards are gradually becoming more sensitive to public opinion, and no doubt there will have to be give and take on both sides before the new Hospital Plan assumes its final pattern for serving those ordinary folk who pay their taxes to cover the enormous cost of the experiment. Such philosophies have a considerable impact upon the public health.

Hospital and Ambulance Arrangements for Infectious Diseases.

National Health Service Act, 1946. Parts II and III.

Hospital accommodation for infectious diseases is provided by the Manchester Regional Hospital Board at Beaumont Hospital, Lancas-

ter, a modern and well-equipped building within easy reach of this area under modern transport conditions.

Smallpox cases will be admitted to the Ainsworth Smallpox Hospital near Bury.

Ambulance transport for cases of infectious diseases is provided by the Westmorland County Council and is based in Kendal.

Disinfection Arrangements.

Disinfection facilities for clothing and bedding are not very satisfactory owing to the lack of a steam disinfecter. It is, however, possible to obtain the service from neighbouring authorities.

Disinfection of premises and other chattels is carried out locally and presents no special problems.

HOUSING.

The Housing Acts.

Under the Housing Acts your Council has a duty to consider the general housing conditions in your District, to ascertain whether any are unfit for human habitation, and to assess the need for further houses. You have powers to deal with unfit houses, powers to provide new houses for all classes, and various powers and duties in the management of your Council's housing estates. Good housing conditions are an integral part of public health.

Present Housing Position.

The number of inhabited houses in your District is 2,370. With an estimated population of 6,550, the average number of persons per house is 2.8. This is not a high figure for a desirably sized family, but the 1951 Census showed that 259 houses had only one occupant, and another 614 houses had only two.

There appears to be little overcrowding within the strict definition of the Housing Act which assumes that living-rooms are used also for sleeping purposes, and that the sexes can be segregated irrespective of age, health or family relationships. At the time of the 1951 Census there were 1,977 private households living in 1,895 structurally separate dwellings.

It is probable that overcrowding is temporarily increased during the peak of the holiday season, but no certificates under Section 61 of the Housing Act, 1936, have been granted by your Council to authorise exceeding the permitted numbers.

General State of Houses.

The general state of the property in your District is good. A few of the older houses are in poor condition. These old houses suffer from rising dampness due to the absence of damp-proof courses which cannot be remedied without excessive work in under-pinning. The sound methods of the original construction have ensured that deterioration of the structure is a very slow process, but heavy repair costs and low rentals have made housing repairs unprofitable to the landlords. These sub-standard dwellings will in due course be dealt with under the Housing Act, but they are overwhelmingly outnumbered by the well maintained and sound property in your District.

General Progress of Slum Clearance and Improvements.

Westmorland as a whole has made very encouraging progress in post-war slum clearance despite all the difficulties of the times. Since the campaign was resumed in 1948 well over 1,000 houses in the County have been dealt with by formal action under the Housing Acts. Most of these will eventually be demolished or converted to trade use, but many of them have been reprieved by their owners undertaking to spend considerable money for comprehensive reconditioning up to modern standards. In addition to these formal actions there have been a very creditable number of informal schemes for the renovation of sub-standard houses, either with the aid of improvement grants or entirely by private enterprise. The aim is to save a house wherever possible, but if it cannot be brought up to an acceptable standard of safety, decency and amenity the sooner it is swept away the better.

In your own District a modest start was made in slum clearance after the war and preliminary inspections were made for future actions. The problem is not a very difficult one in Windermere and I think good progress can be made in pruning out and tidying up the decayed properties.

On the Calgarth estate there were seven houses still occupied at the year end, all of them were Government owned. I hope that the removal of people from these very sub-standard huts will be hastened.

The Housing Repairs and Rents Act, 1954, required your Council to declare their proposals for dealing with sub-standard houses. You resolved to deal with the estimated 40 unfit houses within the next five years. The Ministry of Housing and Local Government approved the proposals, and they are now on deposit for public inspection.

In 1960 the housing proposals were reviewed, and 17 houses remained to be dealt with. The Minister approved the proposals.

Closing Orders.

Housing Act, 1957. Section 18.

No closing orders were made during the year. There were 10 closing orders on the register of local land charges at the year end.

One house subject to a closing order was still occupied at the year end.

Undertakings not to use for Human Habitation.

Housing Act, 1957. Section 16.

Four such formal undertakings were accepted during the year leaving eight undertakings on the register of local land charges at the year end.

Two such houses were still occupied.

Undertakings to Repair.

Housing Act, 1957. Section 16.

There were none during the year and none outstanding.

Improvement Grants.

House Purchase and Housing Act, 1959.

Your Council decided to stop making discretionary grants. In previous years such grants were a useful means of saving and improving sub-standard houses.

During the year 20 standard grants were made for the improvement of houses, making a total of 27 since the commencement of the scheme.

Demolition Orders.

Housing Act, 1957. Section 17.

No demolition orders were made during the year. Three houses in Rayrigg Road were demolished to comply with earlier demolition orders. Three orders remain outstanding on the Register of Local Land Charges.

One of such houses was still occupied.

Clearance Areas.

Housing Act, 1957. Section 42.

No clearance areas were made during the year.

One confirmed clearance area consisting of three houses at Bowness Bank were all still occupied. They have been on the Register of Local Land Charges since 1955 and your Council are under a legal obligation to rehouse the occupiers. This is getting well overdue, although it would seem that two of the houses are illegally occupied, in contravention of the Order.

The other clearance area confirmed in 1955 comprised five houses at Woodside. They have been substantially demolished but the state of the site still leaves much to be desired in the way of tidying up.

Estimated Requirement for New Houses.

Housing Act, 1957. Section 91.

In conjunction with your Building Surveyor I estimate that about 180 houses are required to meet the needs of those without a separate house, those in sub-standard houses, and the families to be rehoused from the Calgarth hutments.

At the year end there were 207 applicants on your Council's waiting list for rehousing.

To what extent your Council should meet this demand is quite another matter. How many people should be encouraged to believe that their rehousing hopes will be fulfilled this year, next year, sometime, or never. Perhaps it might be kinder to tell some of them to fend for themselves or seek a home somewhere else. It must be very difficult for them to weigh up their chances of getting a Council house.

Housing Building Progress.

An extension of 37 three-bedroom type houses on the Droomer Estate was approved and 25 were occupied by the year end. This will alleviate the sub-standard conditions at Calgarth, and also provide approximately 12 houses for general purposes.

Since the end of the 1939-45 War, 311 houses and flats have been built by your Council, and 206 by private enterprise. 40 of the latter were completed during the year.

During the year there were also 21 extra dwellings provided by private enterprise conversion of existing buildings, bringing the post-war total of 140.

Tenants Selection.

The present method of selecting tenants for your Council houses is for your Housing Sub-Committee to consider all the applications and then select the tenants whom they consider are most in need of being rehoused. A pilot points system is in operation and there is no anonymity.

Housing Management.

Your Council now own 391 permanent dwellings. Routine repairs and maintenance are carried out partly by direct labour and partly

by local contractors. Rents vary from 7/- to 23/- per week, exclusive of rates, and the rateable values of the Council houses are between £16 and £28.

The examination of rentals and rates may not seem at first to have much to do with public health, but it does have considerable significance. It is not unknown for persons who have been rehoused from poor quarters into modern Council houses to have to pay their rents and rates from the portion of their income which rightly belongs to the purchase of food. Domestic economy can affect the general standard of the public health almost as much as environmental conditions, and some attempt must be made to maintain a balance between these conflicting factors.

Verminous Houses.

Public Health Act, 1936. Section 83-85.

No action was necessary during the year.

Nuisances and Notices re Dwellings.

Public Health Act, 1936. Sections 91-100.

During the year the following action was taken:—

Informal Notices served	...	39
Statutory Notices served	...	1

In no case was it necessary to obtain an Abatement Order from the Court. There was a general desire on the part of owners to remedy the defects.

Certificates of Disrepair.

Rent Act, 1957.

There were no applications for certificates, no proposals to issue such certificates were served and no undertakings to carry out the works was accepted by your Council. No certificates were served to owners.

Dangerous Buildings.

Public Health Act, 1936. Section 58.

One informal notice was served during the year.

Parks and Open Spaces.

Your Council has extensive parks and open spaces both around the Lake and on the surrounding heights. These form a very valuable amenity for the elderly and those who for various reasons enjoy leisurely contemplation of the mountains.

Bathing Facilities.

A portion of Windermere Lake is marked off by stakes at Miller-ground. The bathing is safe from physical dangers and from any serious contamination as lake water flows naturally through the pool at all times. During 1955 I drew your Council's attention to the undesirability of visitors to Millerground drinking from Wynlass Beck which receives sewage effluents, and the cemetery drainage, not far upstream. I recommended warning notices and the provision of a water tap from the public main. I am also not satisfied with the drainage from certain premises in that area. Luckily the polluting sources are some distance from the bathing-pool. Indiscriminate excretion on the adjoining land presents difficulty from time to time, but the renewed interest taken in the Swimming Club has led to a very welcome improvement in the general hygiene of the site.

Caravans.

Caravan Sites and Control of Development Act, 1960.

Four caravan site licences were issued during the year, one of which was for an individual caravan later removed from the site.

Improvement works were being carried out on the larger sites at Falbarrow, Green Farm, Barker Knott, and Limefitt. Removal action was commenced against one unauthorised caravan.

Tents, Vans, Sheds and Moveable Dwellings.

Public Health Act, 1936. Sections 268-269.

One licensed camping site was on the Register at the end of the year. Your Council imposes conditions upon the grant of licences and requires their annual renewal. As this District is within the National Park it is most desirable that strict but unobtrusive supervision should be exercised over camping sites to ensure that the natural beauty of the country is not despoiled by the careless few.

Unlicensed camping sites are scattered throughout the District but very little nuisance arises from casual campers. The improvised sanitary arrangements and refuse disposal cause little trouble, but the campers take water from polluted becks at their own risk.

One individual camping licence was in force at the year end.

WATER SUPPLIES.

Water Act, 1945.

My earlier Annual Reports provided a very detailed account of the historical, geographical, geological and technical features of your two

sources of public water supply at Dubbs and Ghyll Head. This year's report will be limited to progress records.

The public water supply is potentially adequate in quantity and now very satisfactory in quality. The results of laboratory examinations of the water samples taken during the year are set out in Appendix "A". Regular sampling of both raw and treated waters is carried out.

Droughts place a great strain upon the supplies, and water shortage at the height of the tourist season can be very embarrassing. The annual rainfall is more than adequate, and the problem resolves itself into either increasing storage at the elevation which can be secured at Dubbs and Borrans, or by remedying the waste of water in the distribution system, by developing a new source, or by drawing an increased amount from the Thirlmere aqueduct. The shadow of amalgamation into a larger water board area lies over your undertaking, very much against your local wishes.

1961 will be the last full year of your Council's historical role as the statutory water undertakers for your District, since you took it over from the private company. Next year will see the transfer of functions to the newly formed Lakes and Lune Water Board. You will, of course, still be expected to see that the quality of the public water is properly maintained, and you may wish to press the Water Board to make certain improvements.

We shall continue to operate the excellent liaison arrangements with the Westmorland officers of the Ministry of Agriculture, Fisheries and Food, for the joint investigation and assessment of applications for grant-aided farm water supply schemes. I have been most grateful for the longstanding co-operation of the Ministry's Regional Advisory Bacteriologist and the other staff at the Regional Headquarters in Newcastle-upon-Tyne. It enables us to co-ordinate the safeguards to the public health as well as the agricultural interests.

Dubbs Supply.

The sanitary arrangements at the annual sheep dog trials held on your gathering ground were under my personal supervision during the year.

The installation of the chlorinator at Dubbs has removed many of the previous difficulties of safeguarding that supply. The recent sample results have been excellent.

Ghyll Head Supply.

The condition of the headworks has deteriorated. Negotiations for

acquisition of the gathering ground have been in progress for very many years. On the whole Ghyll Head is not a very desirable source of supply, although by filtration, alkalisation, and chlorination it is made usable.

In conclusion, I have to advise your Council that the other recommendations contained in Memorandum 221 of the Ministry of Health should be constantly observed. Your Council has a double responsibility of supplying pure water as undertakers, and of safeguarding the health of your population as a Sanitary Authority.

Natural Radioactivity of Drinking Water.

Samples of water were taken during 1961 from the headworks of all your public drinking-water supplies. In all instances the natural radioactivity was very low, being less than 0.1 micro-micro-curies per cubic centimetre of gamma activity.

Similar tests were made in the same year at all the other public drinking water supplies throughout Westmorland, where varying small levels of natural radioactivity were found in sources derived from the sedimentary rocks. It was therefore interesting to find that we have so low natural activity in the water from our own igneous rocks in the Borrowdale volcanic series.

The results of these tests for natural radioactivity are mainly of pure scientific interest at the present time. It is too early to assess what effect, if any, there might be on health.

No estimations were sought for beta activity, the fall-out of fission products from atomic bomb tests in other parts of the world. The reason was that the requisite elaborate radio-chemical analysis facilities are not reasonably available to us. Nevertheless, the fall-out has been regularly monitored by various other Authorities who use our area as one component in building up a picture of the national and international pattern of deposition from the atmosphere. From time to time they publish selected results of their findings, so we are able to get some idea of what comes down with our local rainfall. But at the present time too little is known about the effects of these fission products upon the human body and future generations. All we have to remember is that we are in the second half of the 20th century.

Connections.

The Water Engineer informs me that the number of houses connected to the public supply is about 2,272, which leaves 98 reliant upon private supplies. There are stated to be no houses supplied from standpipes.

I have no official knowledge of the quantity of the private water supplies, but I suspect that the quality of the average supply fluctuates widely and I can do no more than warn the users that they drink it at their own risk, that they should have it tested for purity at regular intervals and that if in doubt they should boil it.

General Provision of Baths and Sinks.

The 1951 Census showed that your District held 1,977 households, of which 510, or about a quarter had no fixed bath, 32 of them had no kitchen sink. I hope that the introduction of standard grants will go some way towards remedy of this need, and it will be interesting to see what improvements will be shown when the 1961 Census figures become available.

SEWERAGE.

Public Health Act, 1936. Sections 14-15.

The greater part of your District is provided with public sewerage which was installed or relaid during the last 50 years.

Sewage has to be pumped to Tower Wood at two points in the system. The first pump is situated at Calgarth and the second at Bowness Bay. There are storm water overflows in connection with each of these plants for the excess to pass directly into the Lake. The dry weather flow of sewage received at Tower Wood was estimated to be 600,000 gallons per day, which is a high figure for the population served by the sewerage system. As prolonged dry weather is not common in your District, the normal working level of the flow under average climatic conditions is between 1,000,000 and 1,500,000 gallons per day, which is rather a dilute sewage. The general provision of plant is satisfactory for producing a good effluent, but improvements are being planned.

The majority of the houses which are not in the sewage area use cesspools and septic tanks. A few pail-closets still exist in some of the older property, and a few privies and privy-middens are in use in the outlying parts of the District. The 1951 Census showed that 52 households were without water-closets, and a further 129 shared one. There were no conversions to water-closets during the year.

Public Conveniences.

Public Health Act, 1936. Section 72.

Public conveniences are sited at Bowness Bay, Pinfold, New Road, Broad Street, Queen's Park and Glebe Road.

PUBLIC CLEANSING.

Refuse Collection.

Public Health Act, 1936. Section 72.

Domestic refuse is collected from the whole of your District with the exception of a few detached and isolated dwellings. Your Council's own vehicles and staff are used for this work.

Refuse Disposal.

Public Health Act, 1936. Section 76.

Your Council opened their present tip at Lindeth in 1957 and undertook to carry out fully-controlled tipping to the standards laid down by the Ministry of Health. That promise will require the expenditure of sufficient money to provide adequate labour on the site and a proper amount of covering material. Otherwise nuisances and public risks will be created.

Street Cleansing.

Public Health Act, 1936. Section 77.

This work is undertaken by the Highways Department and the streets are well maintained.

FOOD AND DRUGS.

General Powers.

Food and Drugs Act, 1955.

Your Council bear most of the statutory responsibility for safeguarding the public from foodborne diseases. The main aim is directed towards securing proper and hygienic conditions for the manufacture, preparation and sale of food. The secondary aim is to trace and localise any outbreaks of disease which may occur in spite of preventive measures.

Precautions against Contamination.

Food and Drugs Act, 1955.

Food Hygiene Regulations, 1955.

Food hygiene is steadily improving throughout your area. Public opinion is well ahead of the law and most traders are aware of the fact. The good food trader does not need official instruction in basic cleanliness or in the enforcement of legal minimum standards. He may welcome advice on technical problems, but his aim is how high he can get, not how low he can get away with.

The responsibility for safe food does not rest entirely with the trader, as the housewife must play her part as well. Quite a lot of strange things happen to food between the shop counter and the dinner plate, and the educational campaign has had to be carried into the home. Foodborne diseases, mild dysenteries and attacks of diarrhoea and vomiting are not infrequent in our homes and among our visitors. I am confident that higher standards will reduce these preventable diseases.

Ice-Cream Trade.

Food and Drugs Act, 1955. Section 16.

Ice-Cream (Heat Treatment, etc.) Regulations, 1947.

The following premises were registered:—

Manufacture by hot mix, cold mix, storage and sale	...	3
Manufacture by cold mix, storage and sale	... ..	1
Storage and sale only	... ..	44

Prepared Meats.

Food and Drugs Act, 1955. Section 16.

The number of premises on the Register for the preparation of sausages, potted meat, preserved meat, pressed meat and pickled food was 16 at the year end. No particular difficulties have been encountered in these trades.

MILK.

Registration of Milk Distributors and Dairies which are not Dairy Farms.

Milk and Dairies Regulations, 1959.

Total number of registered distributors on register	...	25
„ „ dairies	... ..	1

With the classification of Windermere as a specified area, the retail distribution is solely by bottled designated milk, except in the case of the larger establishments, where milk is delivered in larger sealed containers.

Pathogenic Organisms in Milk.

Food and Drugs Act, 1955.

No samples were taken for biological test. With the eradication of bovine tuberculosis, it seems likely that the next milkborne disease to be tackled may be brucellosis. I believe that many human cases go unrecognised.

It was not necessary to stop any milk supply or restrict the activities of any milk handlers under the Milk and Dairies Regulations on account of infectious disease.

Condemnation of Meat.

Food and Drugs Act, 1955.

All slaughtering is carried out at the Kendal Abattoir where the meat is inspected by the Borough Inspectors. No meat was condemned during distribution within your District on account of subsequent bone taint.

Condemnation of Other Foods.

Food and Drugs Act, 1955.

The following foodstuffs were condemned by your Inspector during the year:—

Bananas	...	3 tons 8½ cwts.
Potatoes	...	2 tons 3 cwt.
Meats	...	161 lbs.
Vegetables	...	9 lbs.
Fish	...	2 lbs.
Fruit	...	12 lbs.

Method of Disposal of Condemned Food.

The Minister of Health requires me to describe the current methods for the disposal of condemned food. In this District it is buried at the Council's refuse tips.

GENERAL INSPECTIONS.

From 1st April, 1956, the major revision of your Council's staff split the longstanding combined appointment of Engineer and Surveyor with Public Health Inspector. The new arrangement provides for the sharing of a Public Health Inspector with the neighbouring Rural District of South Westmorand.

Mr. Shepherd devotes four sessions per week, made up of two whole days, to his Public Health Inspection duties at Windermere. The arrangement seems to be working very well in practice. 393 inspections were carried out during the year.

Offensive Trades.

Public Health Act, 1936. Section 107.

There are no offensive trades in the District.

Factories.

Factories Act, 1937.

There are 53 factories on the Register. 46 inspections were made. One written notice was issued and no prosecutions were required.

No references were made to H.M. Inspector of Factories and none were received from him.

Factory Inspections.

Premises.	Number of Premises.	Number of		
		Inspec- tions.	Written Notices.	Occupiers prosecuted.
Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities ..	6	4	—	—
Factories not included in (1), in which Section 7 is enforced by Local Authority	47	42	—	—
Other premises in which Section 7 is enforced by the Local Authority (excluding outworkers' premises)	—	—	—	—
Total	53	46	—	—

No defects were found.

No lists of outworkers were supplied to your Council by factory owners, and I have no official knowledge of any cases of default in this respect.

There are no basement bakehouses in the District. No certificates of the means of escape from factories in case of fire were issued during the year.

H.M. Inspector of Factories has been given details of your Urban District's administration of the relevant sections of Parts I and VIII of the Factories Act, 1937.

Shops Act, 1950.

38 visits were made under the Shops Act for the supervision of sanitary accommodation, washing facilities, and the maintenance of suitable temperatures.

Common Lodging Houses.

Public Health Act, 1936. Part IX.

There are no registered common lodging houses in the area.

Pests Act, 1949.

Your District is covered by the South Westmorland Joint Pest Control Board. Regular visits are made to your refuse tip, which seems to attract rather an undesirable number of rats. Service is also provided under contracts for many other premises in your area.

Rent Restriction Acts.

No action was taken during the year under the Rent and Mortgage Interest Restriction Acts, and no contraventions regarding rent book entries were encountered.

Smoke Abatement.

Public Health Act, 1936. Sections 101-106.

No notices were served during the year to abate smoke nuisances.

Compulsory Removals.

National Assistance Acts, 1948-1951.

Three people were kept under my eye during the year, because I was notified that they were thought to be incapable of looking after themselves and were not being helped enough by others.

One went voluntarily into hospital and died later in the year. One had her problems lightened by rehousing from a cellar-dwelling into a Council flat. One remains still rather a worry to the welfare services who came to her rescue.

Such cases are extremely distressing to deal with, and the course of compulsory removal is reserved to meet the emergencies of a last resort when all other methods of help have failed. Sometimes it is very hard to decide what is really in the best interests of the patient.

A special conference was held during 1961 with the Welfare Authority to see what more could be done to prevent people from getting into such difficulties. Home help services, hostels, and partial dependency schemes may meet some of the problems. I hope that the harsh step of compulsory removal will be less needed as time goes by. It is so often tantamount to a death warrant.

Laboratory Services.

National Health Service Act, 1946. Section 17.

The Public Health Laboratory Service at Preston and Carlisle provide most of the facilities for our investigations.

Public Mortuary and Post-mortem Room.

Public Health Act, 1936. Section 198.

Your Council have long provided a public mortuary and post-mortem room at Windermere, but post-mortem examinations have not been done there for many years on account of a lack of modern facilities. The premises are now kept solely as a public mortuary.

Byelaws.

Byelaws on public health matters are in force for:—

Building.	Nuisances.
Burial Grounds.	Slaughterhouses.
Common-Lodging Houses.	Pleasure Grounds.
Food handling.	

New Legislation.

Home Safety Act, 1961, became operative 18th May, 1961.

Public Health Act, 1961, became operative 3rd October, 1961.

Housing Act, 1961, became operative 24th November, 1961.

Factories Act, 1961, became operative 1st April, 1962.

APPENDIX "A"
LABORATORY EXAMINATION OF PUBLIC WATER
SUPPLIES

Nature of Test	Standards Max.	Dubbs Raw	Ghyll Head Raw	Ghyll Head Treated
Pr. coli count 37° ..	3-10	8	7	
Faecal coli/strep ..		+	+	0
Character	—	Clear	Clear	Clear
Reaction	—	7.3	7.0	8.4
Ammonical Nitrogen	.041	Nil	Nil	.033
Albuminoid Nitrogen	.066	.045	.09	.097
Total Solids ..	1000	48	44	100
Hardness {	Total ..	34	22	30
	Carbonate	22	7	0
	Non-Carb.	12	15	30
Chlorides	30	8	9	8.5
Nitrates	1	.02	.05	—
Nitrites	—	—	—	—
O.2 Absorbed ..	1	.64	1.76	1.4
Heavy Metals ..	—	n/a	n/a	—
Rainfall 24 hours ..	—	Nil	Nil	.06"
Date Sampled ..	—	14.11.61	14.11.62	25.11.53
Laboratory	—	Preston	Preston	Carlisle

Chemical analyses expressed in parts per million.

